

INCOME AND EXPENSE QUESTIONARRE FOXBOROUGH MA

| Property Location: | Mixed Use Property | Calendar Year: 2010 |
|--------------------|-------------------------|---------------------|
| Parcel ID: | Rental Income Statement | |

Commercial Lease Information: Please provide information on current leases as of January 1st.

| | | | Lease Terms | | | | | |
|----------------|-------------|------------------|-----------------------------|-------------------------------|----------------|--------------------------|---------------------|--------------------------------|
| Floor Level | Tenant Name | Type of Space | Leased Area (Sq. ft.) | Rent per SF on Jan. 1st | Annual Rent | Start Date (Mo/Yr) | Term in years | Basis Gross, Net, NNN |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |
| | | | | \$ | \$ | | | |

Residential Rental Information: Please provide the following rental information.

| The effec | The effective reporting date is January 1st. | | | Rent Incentives | | Lease Terms | | | |
|--------------|--|-------------------|----------------|-----------------|------------------|-----------------------------------|---------------|----------------|-----------------|
| Unit Type | Total # of Units | Rent per Month | Annual Rent | Free Rent | Free # of Months | Lease Start Date (Mo/Yr) | Heat (Y/N) | Elect (Y/N) | Lease or TAW |
| Studio | | \$ | | \$ | | | | | |
| Studio | | \$ | | \$ | | | | | |
| One | | \$ | | \$ | | | | | |
| Bedroom | | \$ | | \$ | | | | | |
| Two | | \$ | | \$ | | | | | |
| Bedroom | | \$ | | \$ | | | | | |
| Three | | \$ | | \$ | | | | | |
| Bedroom | | \$ | | \$ | | | | | |

| The effective reporting date is January 1st. | | | Rent Incentives | | Lease Terms | | | | |
|--|------------------------|-------------------|-----------------|--------------|------------------|-----------------------------------|---------------|----------------|-----------------|
| Unit Type | Total # of Units | Rent per Month | Annual Rent | Free Rent | Free # of Months | Lease Start Date (Mo/Yr) | Heat (Y/N) | Elect (Y/N) | Lease or TAW |
| Four | | \$ | | \$ | | | | | |
| Bedroom | | \$ | | \$ | | | | | |
| Weekly | | \$ | | \$ | | | | | |
| VVEERIY | | \$ | | \$ | | | | | |

| I certify under the pains and penalties of perjury that the | e information supplied herewith is true and correct: |
|---|--|
| Submitted by: | Title: Phone: |
| Signature: | Date: |